PTO/SB/26 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Tradomark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no parsons are required to respond to a collection of information unless it displays a valid OMB control number.

| TERMINAL DISCLAIMER TO OBVIATE A DOUBLE PATENTING  |  | Docket Number (Optional)  |
|--|--|---|
| REJECTION OVER A PRIOR PAT   | ENT  | DEVOE-09CO  |
| In re Application of: Devos et al.   |  | ·• ·  |
| Application No.: 10/694,125  |  |   |
| Filed: October 27, 2003  |  |   |
| For SINGLE LAYER CAPACITOR   |  |   |
| The owner*, <u>Presidio Components, Inc.</u> , of <u>100</u> disclaims, except as provided below, the terminal part of the state which would extend beyond the expiration date of the full state shortened by any terminal disclaimer, of prior Patent No. <u>6.661</u> so granted on the instant application shall be enforceable only commonly owned. This agreement runs with any patent granted its successors or assigns. | tutory term of any patent granted<br>utory term defined in 35 U.S.C.<br>.639   | d on the instant application,<br>154 and 173, as presently<br>eby agrees that any patent<br>it and the prior patent are |
| In making the above disclaimer, the owner does not di application that would extend to the expiration date of the full prior patent, as presently shortened by any terminal disclaim maintenance fee, is held unenforceable, is found invalid by a whole or terminally disclaimed under 37 CFR 1.321, has all clais in any manner terminated prior to the expiration of its fudisclaimer.                                      | statutory term as defined in 35 ner, in the event that it later: e court of competent jurisdiction, ims canceled by a reexamination. | U.S.C. 154 and 173 of the expires for failure to pay a is statutorily disclaimed in certificate, is reissued, or        |
| Check either box 1 or 2 below, if appropriate.   |  |   |
| 1. For submissions on behalf of an organization (e.g., con etc.), the undersigned is empowered to act on behalf or   | poration, partnership, university,<br>f the organization.  | government agency,  |
| I hereby declare that all statements made herein of my information and belief are believed to be true; and further that the false statements and the like so made are punishable by fine of the United States Code and that such willful false statements in issued thereon.   | nese statements were made with<br>r imprisonment, or both, under (   | the knowledge that willful<br>Section 1001 of Title 18 of   |
| 2. The undersigned is an attorney or agent of record.  | Huste Z David  | 100 8/6/04<br>Date  |
|  | Kristi L. Davi   | idson   |
|  | Typed or printed name 513-241-2324   |   |
|  |  |   |
|  | Telephone Nu   |   |
| Terminal disclaimer fee under 37 CFR 1.20(d) included.   |  |   |
| WARNING: Information on this form may become population be included on this form. Provide credit card information.   | ublic. Credit card information sho<br>nation and authorization on PTO-2  | ould not .<br>2038.   |
| *Statement under 37 CFR 3.73(b) is required if terminal disclaimer is signed by the assignee (owner). Form PTO/SB/96 may be used for making this certification. See MPEP § 324.  |  |   |
| his collection of information is required by 37 CFR 1 321. The information is required to obtain a regain a banafit by the public which is to file (and by the   |  |   |

USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9189 and select option 2.